

# Tranquility rooms for team member well-being: Implementation during COVID-19 pandemic

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## Abstract

In 2020, the COVID-19 global pandemic changed the landscape of healthcare delivery and with it the need to better address team member well-being. Aside from patients and their families, healthcare professionals were among the most affected and at high risk for suffering psychological distress, including increased stress, depression, anxiety, substance use, and post-traumatic stress disorder. Prior to COVID-19, healthcare workers were already experiencing a high rate of job burnout, depression, and suicide. The pandemic brought in sharp focus the essential and urgent need for healthcare facilities to acknowledge the importance of team member well-being and the provision of spaces such as tranquility rooms for use while at work. This case study shares one health system's evidence-based implementation plan for tranquility rooms, what was learned, and how team members responded. More research is needed to better understand team member well-being and the impact of tranquility rooms.

## Keywords

COVID-19, resilience, well-being, tranquility rooms, human experience

## Introduction

In 2020, the pandemic caused by coronavirus disease 2019 (COVID-19) swept the world and halted normal processes and operations worldwide. Aside from the unfortunate victims who contracted COVID-19, healthcare professionals were among the most affected by the pandemic. In any event that involves excessive healthcare needs, clinicians are among the most at risk for suffering psychological distress, including increased stress, depression, anxiety, substance use, and post-traumatic stress disorder.<sup>1-3</sup>

Prior to COVID-19, health care workers were already experiencing a high rate of job burnout, depression, and suicide.<sup>3</sup> These factors are detrimental to clinicians' physical and mental well-being, as well as significantly affecting patient care and patient experiences.<sup>4-5</sup> Thus, team member well-being was a high priority for healthcare organizations.

As of May 6, 2020, North Carolina (NC), specifically eastern NC, experienced an increase in the number COVID-19 cases and deaths with state-wide confirmed cases at 12,758 (477 deaths), with 1,420 (52 deaths) being reported within the health system that serves the 29-counties of rural eastern NC. In watching other cities across the nation, it was acknowledged that the numbers

of reported cases and deaths were only the beginning of the pandemic and only the beginning of the response needed from ECU Health.

At ECU Health, a rural academic health system in eastern NC, there were 591 providers and 13,934 team members working with COVID-19 patients or supporting those that were working directly with COVID-19 patients, both spending countless hours away from their families and risking their own health and well-being. ECU Health's system of care includes 1,708 beds across an academic medical center with two campuses, a children's hospital, seven community hospitals, and numerous outpatient facilities, as well as home health and hospice services. The system includes a multi-specialty physician and provider group, offering primary care and specialty access in 100+ practice locations. ECU Health serves more than 1.4 million people living in mostly rural environments and is the only health care provider for much of eastern NC, and for that reason, it was imperative that the teams that cared for the population of eastern NC be cared for. Early in the health system pandemic response, ECU Health prioritized team member well-being.

## Tranquility Rooms

At ECU Health, tranquility rooms were defined as a concept innovation to provide an unobtrusive and

peaceful place for healthcare workers to rest, quiet their minds, restore their energy and support their well-being. These rooms were designed for healthcare workers to aide in managing the stress that comes with working with COVID-19 infected patients and families. In *Tranquility Room Study: Caring Perspectives*,<sup>6</sup> utilization of these spaces were shown to potentially afford (a) greater clarity of mind; (b) a potential tool to decrease overall stress in today's complex nursing environment; (c) an increased serenity throughout the nursing practice day; and (d) greater focus on human care for all stakeholders. In another study with emergency room staff, it was found that those that used a restorative space reported it reduced stress and they felt more focused and renewed when returning to work.<sup>7</sup>

In the book *Healing Spaces*,<sup>8</sup> Esther Sternburg talks about the impact of the environment on healing for patients and the impact of space design and light on human vital signs, neurochemical transmission, and general sense of wellbeing. Research identifies that creating spaces which include soundscapes of nature, aromatherapy and windows or doors with a view of the outside environment can affect the human personal stress response and overall well-being. These patient environment concepts were some of the inspiration used to design tranquility room stations, utilizing light, smell, sound and nature as healing aspects to support well-being for those working during the pandemic.

## Implementation

Setting up tranquility rooms during the COVID-19 pandemic comes with many challenges. All healthcare spaces during the pandemic were required to adhere to social distancing requirements as directed by the North Carolina Governor. Merriam-Webster<sup>9</sup> describes social distancing as the practice of maintaining a greater than usual physical distance (such as six feet or more) from other people or avoiding direct contact with people or objects in public places during the outbreak of a contagious disease in order to minimize exposure and reduce transmission of infection.

Each hospital within the health system and two of the multi-specialty clinics identified spaces for a tranquility room. The choice of space was based on availability. The large academic medical center chose a large outpatient registration area that was not being used during COVID-19, while some of the small hospitals chose registration areas or meeting rooms that were not being used, also because of restrictions related to COVID-19, and two community hospitals chose to convert their chapels to a tranquility space. The clinics chose unused break room areas for their tranquility rooms.

To support social distancing, the tranquility rooms were set up in stations with each station designed for individual use and positioned at least six feet apart. Larger spaces were desirable for tranquility room implementation, but because of how tranquility rooms were designed, even a smaller space could accommodate the station design.

Realizing that many team members would visit the tranquility rooms on breaks lasting 15-30 minutes, each station was designed to provide a reflective, self-care experience in a short amount of time. There was a capacity placed on total number of team members that could be in the tranquility room at one time, based on number of stations and social distancing requirements to ensure safest use and compliance with public health directives.

Two examples of tranquility room stations are the *gratitude and love note* stations. Studies by Dr. Barbara Fredrickson<sup>10</sup> show focusing on positive emotions promotes an upward spiral to foster resiliency and well-being. Utilizing gratitude as a positive emotion, gratitude and love note stations included both a gratitude journal for team members to share their grateful moments and note cards for team members to write thank you letters to family and friends. Team members wrote in the gratitude journals expressing gratefulness for jobs, health, family, friends and the tranquility room space. Another station that focused on positive emotions was coined the *hope jar station*.

Another example of a tranquility room station was the *nature station*. Relaxing music, paired with scenes of nature, were chosen for this station, providing a break from the noises experienced on the inpatient units, such as alarms that are often at a pitch not pleasing to the human ear.<sup>11</sup> The tranquility room music was chosen intentionally to produce a sense of calm and relaxation. Other examples of tranquility room stations can be found in Table 1.

Tranquility rooms and stations needed frequent sanitization. Each station had cleaning supplies and directions on how to sanitize after use. Hospital environmental services took on the additional responsibility of sanitizing the tranquility rooms each shift.

In order to scale tranquility rooms across the health system, supplies to set up stations were standardized. Signs for the entrance and various stations were sent to the health system print shop so they could be ordered directly for ease and consistency by any department. Table 1 describes all tranquility room stations and supplies included in each station.

Small bags that included items from a variety of stations were offered at the entrance to the tranquility room called "tranquility-to-go." These were available if the tranquility room was at capacity when a team member came to the

**Table 1. List of Tranquility Room Stations and Supplies**

Tranquility Room Stations	Station Supplies
Positivity Computer Station	Sign for station Ear buds Computer station loaded with YouTube Instagram positive channels
Moving Meditation Track Station	Sign for station and signs to direct where to walk Signage on the floor to show meditation track positive quote signs along track route
Love Note Station	Sign for station Various note cards (Thank you and blank note cards) Markers and pens Cork board for posting notes if station user so choose
Hope Jar Station	Sign for hope jar with instructions “Write down your hopes” Large jar Markers and pens
Worry Jar Station	Sign for worry jar with instructions “Write down your worries” Large jar Markers and pens
Nature Station	Sign for station One bench for each station Donated flowers and plants positioned around and behind bench Positive quotes on walls
Naturescape station	Sign for station Several lounge chairs social distanced Projector (or large TV playing nature scenes, and soothing music)
Massage Station	Massage chair (donated) and Sign for cleaning massage chair
Art Therapy Station	Sign for station with instructions Doodle how-to Sign Doodle display sign Resilience doodle cards (card stock) Colored pencils
Meditation Station (set up in front of large window for view of nature)	Sign for station Yoga mat Mindful meditation how-to cards Battery candles Salt lamp
Aromatherapy Station	Sign for station Basket for aroma therapy to-go bags Cotton ball with lavender or orange with a bag sticker to outline the benefits of the aroma
Gratitude Station	Sign for station Journals with prompt note: “What are you grateful for?”
Resource Station	COVID-19 resources and education for team members Hand sanitizer

entrance or for the team member to take back to their work area and extend their tranquility room experience. For example, an aromatherapy “tranquility-to-go” was provided that included lavender oil cotton balls in aromatherapy bags for team members to keep in their pocket and use throughout their day. Studies have consistently shown that lavender helps to decrease symptoms of anxiety.<sup>12</sup>

### Team Member Response

Team members reported appreciation for having a calm space for reflection and decompression during their shifts. Examples of comments left at the gratitude station in reference to the tranquility room included: “This was a beautiful idea,” “I love having a place to just relax before, after or even during a hard day,” “I take my breaks out here at night because I need some quiet to clear my head,” “I don’t know whose idea this tranquility room was, but it’s brilliant,” and “I am thankful to work in an

organization that will set up a tranquility space to allow staff a sanctuary to come and decompress.” These comments are consistent with other comments found in the literature related to use of tranquility room spaces.<sup>6-7</sup>

After initial tranquility rooms opened, some team members expressed that they were not able to leave their units or clinic desks to benefit from the space. In response, mini-tranquility rooms were set up in break rooms and unused waiting areas. This was especially impactful for the COVID-19 units, where team members did not feel that they could be off the unit for any length of time.

In setting up mini-tranquility spaces, it became clear from feedback that not all stations appealed to all teams. Team members found it engaging to be able to choose what stations most appealed to them and met their needs. This led to customization of tranquility spaces that also engaged the team in the set up and design. The choices of stations were highly variable by team; however, the massage station, love note station, gratitude station and art station were the most often chosen for mini-tranquility rooms.

## Implications

In order to support team member well-being, it is essential that healthcare organizations acknowledge the importance of team member well-being. The COVID-19 pandemic stressed healthcare teams tasked with already challenging daily duties. The impact on well-being will be studied for many years post-pandemic. Nevertheless, COVID-19 provided the opportunity for healthcare systems to support well-being in unique and innovative ways. Tranquility rooms are one such example.

To better understand healthcare team member well-being, defining well-being is warranted within the healthcare field, as well as feedback methods from team members to provide insights into their own well-being. More frequent and advanced data collection from healthcare team members is needed to understand well-being and what actions and interventions might affect well-being. Further study is needed to understand the long-term impact of tranquility rooms on healthcare team member’s well-being. More research is needed to understand what actions, strategies and activities contribute to team member well-being.

## Limitations

Limitations to this case study include the ability to measure the effects of the impact of use of tranquility rooms on team member well-being. The current engagement survey used at ECU Health includes measurement of team member resilience, but not well-being. There was no baseline definition or measure of well-being pre-pandemic.

The innovation of tranquility rooms was conceptualized during the pandemic and due to desire to implement quickly to support team members, no data was collected. Data from team members is needed to demonstrate the effects of tranquility room use on team member well-being.

Utilization of the tranquility rooms was not formally tracked during the pandemic. More data is needed on location preference of tranquility rooms for best usage. Usage of the “tranquility-to-go” concept was tracked by counting how many “tranquility-to-go” bags were taken on a weekly basis. For example, though highly variable, at the health system academic medical center, pick up of bags was counted from 200 bags per week to 75 bags per week during the first 6 months post tranquility room implementation.

Post-pandemic, as some of the spaces chosen for tranquility rooms were put back into use, more permanent spaces were needed. Local unit break rooms, staff meeting rooms and waiting areas were converted to mini-tranquility rooms, which were easy to implement using the standardized stations.

## Conclusion

In order to support team member well-being, it is essential that healthcare facilities and organizations first acknowledge the importance of team member well-being and support the provision of activities and interventions such as tranquility rooms for team member use while at work. Post-pandemic healthcare will be compelled to create policies and practices to address well-being not in an episodic way, but as a standard part of team member recruitment, retention and workplace well-being. This will require healthcare systems to provide resources, time and space for well-being.

ECU Health continues to focus on team member well-being, and tranquility rooms remain a feature of the organizational workplace well-being. Post-pandemic, the tranquility rooms have been moved to more local spaces such as break rooms, meeting areas and waiting areas and have become a part of the ECU Health well-being culture.

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